

012304

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(See 37 CFR 1.53(b))

**APPLICATION ELEMENTS***(See MPEP chapter 600 concerning utility patent application contents.)*

1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i>	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy <i>(identical to computer copy)</i></li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <i>(Total Sheets (5))</i>	8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. <input checked="" type="checkbox"/> Oath or Declaration <i>(Total Pages (2))</i>	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>
a. <input checked="" type="checkbox"/> Newly executed (original or copy)	10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 Below]</i>	11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	12. <input type="checkbox"/> Preliminary Amendment
5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
	14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement Filed in prior application, Status still proper and desired
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
	16. <input type="checkbox"/> Other: _____

17. a. If a **CONTINUING APPLICATION**, check appropriate box and supply requisite information.

Continuation     Divisional     Continuation-in-part (CIP)

of the following application(s), each of which is hereby incorporated herein by reference:

U.S. PTO  
10/763982  
012304

b. **Priority Applications**

In addition to any applications listed in 17a, the present application also claims priority to the following application(s), each of which is hereby incorporated herein by reference.

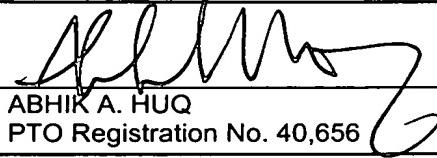
U.S. Provisional Application No.: 60/443,294

Filed: January 29, 2003

**18. CORRESPONDENCE ADDRESS**

Customer Number 32364 or  
**DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.**  
 1601 Market Street, Suite 720  
 Philadelphia, PA 19103-2307  
 Phone (215) 563-4100      Facsimile (215) 563-4044

to the attention of: Clement A. Berard

  
 ABHIK A. HUQ  
 PTO Registration No. 40,656

1/23/04

012304

17698 U.S. PTO

## **FEE TRANSMITTAL**

 <b>FEE TRANSMITTAL</b>	<p><i>Complete if known</i></p> <hr/> <p>Application Number: Not yet Assigned</p> <hr/> <p>Filing Date: Herewith</p> <hr/> <p>First Named Inventor: Chan, Winston Kong</p> <hr/> <p>Group Art Unit: Not Yet Assigned</p> <hr/> <p>Examiner Name: Not Yet Assigned</p>
<p>Total Amt. of Payment: (1)+(2)+(3)= <b>\$978</b></p>	<p>Attorney Docket Number: SAR14811</p>

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)		
				ADDITIONAL FEES		
1. The Commissioner is hereby authorized to:				<b>Fee Description</b>	<b>Fee Paid</b>	
<input checked="" type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of Sarnoff Corporation Deposit Account Number <u>04-0203</u>				Surcharge-late filing fee or oath		
				Surcharge - late provisional filing fee or cover sheet		
				Extension for response within first month		
				Extension for response within second month		
				Extension for response within third month		
				Extension for response within fourth month		
				Notice of Appeal		
				Filing a brief in support of an appeal		
				Request for oral hearing		
				Petition to revive unavoidably abandoned application		
2. Payment enclosed:				Petition to revive unintentionally abandoned application		
Check in the amount of				Issue fee		
				Petitions to the Commissioner		
				Petitions related to provisional applications		
				Submission of Information Disclosure Stmt.		
				Recording each patent assignment per property		
				Other fee (specify) <u>Advance Order (10 copies)</u>		
				Other fee (specify)		
<b>FEE CALCULATION</b>						
1. FILING FEE				<b>Fee</b>		
<b>Fee Description</b>						
Utility filing fee				750		
Design filing fee						
Plant filing fee						
Reissue filing fee						
Provisional filing fee						
<b>SUBTOTAL (1)</b>				<b>\$750</b>		
					<b>SUBTOTAL (3)</b>	<b>\$0</b>
2. Claims						
				<b>Paid</b>	<b>Extr</b>	<b>Fee</b>
Total Claims				28	-20	= 8 x 18 = 144
Independent Claims				4	-3	= 1 x 84 = 84
Multiple Dependent (First presentation)						
				<b>SUBTOTAL (2)</b> \$228		

**Submitted By:**

Typed or

Printed Name Abhik A. Hug

Reg. Number 40,656

**Signature**

Selma

Date 1/23/04

Deposit Account User ID  
04-0203